

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

ADDRESS (number and street)

7000 CARDINAL PLACE

Check if different
than previously
reported. (ACC)

DUBLIN

OH

43017

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00332833

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Quarterly Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES W. HOEBERLING

Signature of Treasurer

Electronically Filed by JAMES W. HOEBERLING

Date

10

09

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		179267.79
(b) Cash on Hand at Beginning of Reporting Period	192558.68	
(c) Total Receipts (from Line 19)	16341.27	77132.16
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	208899.95	256399.95
7. Total Disbursements (from Line 31)	26500.00	74000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	182399.95	182399.95
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	11241.01	41145.65
(i) Itemized (use Schedule A)		
(ii) Unitemized	4398.62	32140.46
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	15639.63	73286.11
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	15639.63	73286.11
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	701.64	3846.05
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	16341.27	77132.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16341.27	77132.16

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		14000.00	33500.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		12500.00	40500.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		26500.00	74000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		26500.00	74000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	15639.63	73286.11
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15639.63	73286.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Brooke Alexy Mailing Address 15401 Oak Pond Lane City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 954.79		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81872 Amount of Each Receipt this Period 161.54 Receipt Payroll Deduction: (80.77- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Anderson Mailing Address 15917 Willis Way City State Zip Code Woodbine MD 21797 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp/gm, Hsp Mkt & Innov St Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 335.38		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81858 Amount of Each Receipt this Period 115.38 Receipt Payroll Deduction: (57.69- /Pay Period)
C. Full Name (Last, First, Middle Initial) Charles Armstrong Mailing Address 6864 Rob Roy Drive City State Zip Code Dublin OH 43017-8084 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Finance Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.34		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81766 Amount of Each Receipt this Period 44.36 Receipt Payroll Deduction: (22.18- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

321.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Cassandra Baker Mailing Address 1672 Barrington Rd City State Zip Code Upper Arlington OH 43221 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Gov't Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 663.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81854 Amount of Each Receipt this Period 102.00 Receipt Payroll Deduction: (51.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) James Barker Mailing Address 2761 Skelton Ln City State Zip Code Blacklick OH 43004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Purchasing - Glbl Supp Sol Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 251.88		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81762 Amount of Each Receipt this Period 20.99 Receipt Payroll Deduction: (20.99- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Barker Mailing Address 2761 Skelton Ln City State Zip Code Blacklick OH 43004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Purchasing - Glbl Supp Sol Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 276.88		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7 Transaction ID: 70716.C82021 Amount of Each Receipt this Period 25.00 Receipt Payroll Deduction: (25.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		147.99
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Gregory Baumli Mailing Address 14566 Somerset Cir City Green Oaks State IL Zip Code 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Manufacturing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 332.41			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81776 Amount of Each Receipt this Period 51.14 Receipt Payroll Deduction: (25.57- /Pay Period)
B. Full Name (Last, First, Middle Initial) Laurel Beeler Mailing Address 1723 Eagle Trl City Oxford State MI Zip Code 48371 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81769 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Porter Bertelson Mailing Address 6895 Macneil Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hospital Pharma Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 470.99			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81797 Amount of Each Receipt this Period 72.46 Receipt Payroll Deduction: (36.23- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

173.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Shelley Bird			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 7998 Caraway Ave			Transaction ID: 70716.C81669	
City State Zip Code Dublin OH 43016		Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc		Occupation Evp,communications		Payroll Deduction: (100.0- 0/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
B. Full Name (Last, First, Middle Initial) Timothy Boes			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 103 La Trobe Ct			Transaction ID: 70716.C81873	
City State Zip Code Southlake TX 76092		Amount of Each Receipt this Period 172.86		
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc		Occupation Svp, Medication Solutions		Payroll Deduction: (86.43- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1123.59		
C. Full Name (Last, First, Middle Initial) Scott Bostick			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 1546 Vivaldi Drive			Transaction ID: 70716.C81815	
City State Zip Code Cardiff CA 92007		Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Cardinal Health, Inc		Occupation Vp, Gm-supply Chain Solution		Payroll Deduction: (40.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00		

SUBTOTAL of Receipts This Page (optional)

452.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Anne Bouchenoire Mailing Address 5772 Banavie Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Global Branding Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 481.00		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81798 Amount of Each Receipt this Period 74.00 Receipt Payroll Deduction: (37.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Mark Branday Mailing Address 55 Island Blvd City State Zip Code Fox Island WA 98333 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 414.05		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81795 Amount of Each Receipt this Period 63.70 Receipt Payroll Deduction: (31.85- /Pay Period)
C. Full Name (Last, First, Middle Initial) Thomas Burke Mailing Address 21 Parsons Drive City State Zip Code Swampscott MA 01907 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Supply Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 276.77		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81764 Amount of Each Receipt this Period 42.58 Receipt Payroll Deduction: (21.29- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		180.28
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Gary Cacciatore		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 3810 Loch Glen Court		Transaction ID: 70716.C81793	
City Houston	State TX	Zip Code 77059	Amount of Each Receipt this Period 63.46
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Regulatory Affairs		Payroll Deduction: (31.73- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.64		

B. Full Name (Last, First, Middle Initial) Thomas Calhoun		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 5n496 W Lakeview Cir		Transaction ID: 70716.C81780	
City St Charles	State IL	Zip Code 60175	Amount of Each Receipt this Period 56.16
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Warehouse Distribution		Payroll Deduction: (28.08- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.04		

C. Full Name (Last, First, Middle Initial) Anthony Caprio		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 6 Cottage Lane		Transaction ID: 70716.C81670	
City Marlboro	State NJ	Zip Code 07746	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Evp, Ips Sales Ne		Payroll Deduction: (100.0- 0/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)

319.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Debra Caravelli Mailing Address 4862 Vista Ridge Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Service Deliv/vend Mgm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 273.00		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81763 Amount of Each Receipt this Period 42.00 Receipt Payroll Deduction: (21.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kerry Clark Mailing Address 8515 Fox Cub Lane City State Zip Code Cincinnati OH 45243 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation President/ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 576.90		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81728 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3- 0/Pay Period)
C. Full Name (Last, First, Middle Initial) Douglas Cones Mailing Address 4826 Macallan Court West City State Zip Code Dublin OH 43017-8269 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 242.58		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81719 Amount of Each Receipt this Period 37.32 Receipt Payroll Deduction: (18.66- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		463.92
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mary Cooney Mailing Address 2211 Briarglen #507 City State Zip Code Houston TX 77027 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 664.88		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7 Transaction ID: 70716.C81949 Amount of Each Receipt this Period 131.98 Receipt Payroll Deduction: (131.9-8/Pay Period)
B. Full Name (Last, First, Middle Initial) Bonita Court Mailing Address 1306 Downs Parkway City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Sr Mgr, Sls & Mktg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 290.29		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81767 Amount of Each Receipt this Period 44.66 Receipt Payroll Deduction: (22.33-/Pay Period)
C. Full Name (Last, First, Middle Initial) John Cullivan Mailing Address 1 Miranova Place #910 City State Zip Code Columbus OH 43215 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Strategic Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 461.55		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81710 Amount of Each Receipt this Period 307.70 Receipt Payroll Deduction: (153.8-5/Pay Period)

SUBTOTAL of Receipts This Page (optional)

484.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Jody Davids

Mailing Address 7638 Red Bay Court

City State Zip Code
Dublin OH 43016

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Evp, Global Shared Svc & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81853

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Ronald Dedels

Mailing Address 8371 Dolman Drive

City State Zip Code
Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Sales Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.91

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81711

Amount of Each Receipt this Period

32.14

Receipt

Payroll Deduction: (16.07-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Ted Dibiase

Mailing Address 8103 Catalina
Island Drive

City State Zip Code
Katy TX 77494

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Advice & Counsel Ctr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81863

Amount of Each Receipt this Period

122.40

Receipt

Payroll Deduction: (61.20-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

254.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Scott Dodson

Mailing Address 7000 Grate Park Dr

City State Zip Code
 New Albany OH 43054

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Controller, Nlc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.57

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81722

Amount of Each Receipt this Period

39.78

Receipt

Payroll Deduction: (19.89-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Gary Dolch

Mailing Address 8382 Deep Run

City State Zip Code
 Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Evp, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.20

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81724

Amount of Each Receipt this Period

384.60

Receipt

Payroll Deduction: (192.3-
0/Pay Period)

Full Name (Last, First, Middle Initial)

C. James Egan

Mailing Address 4650 Aberdeen Ave

City State Zip Code
 Dublin OH 43016

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Svp, Enterprise It

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.41

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81778

Amount of Each Receipt this Period

53.14

Receipt

Payroll Deduction: (26.57-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

477.52

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Sue Ellen Erickson

Mailing Address 21 Springfield
1aCity State Zip Code
Cranford NJ 07016FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Mgr li, Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.08

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81714

Amount of Each Receipt this Period

32.32

Receipt

Payroll Deduction: (16.16-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Stephen Falk

Mailing Address 2480 Sandover Rd

City State Zip Code
Columbus OH 43220FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp & General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81673

Amount of Each Receipt this Period

200.00

Receipt

Payroll Deduction: (100.0-
0/Pay Period)

Full Name (Last, First, Middle Initial)

C. Jo Anne Fasetti

Mailing Address 1163 Vineyard Dr

City State Zip Code
Gurnee IL 60031FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Svp, Hr Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.55

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81818

Amount of Each Receipt this Period

92.70

Receipt

Payroll Deduction: (46.35-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

325.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Stephen Flannery

Mailing Address 275 East Center St

City State Zip Code
 Shavertown PA 18708

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Svp, Medication Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.74

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81717

Amount of Each Receipt this Period

35.32

Receipt

Payroll Deduction: (17.66-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Ivan Fong

Mailing Address 21 S. Parkview Ave.

City State Zip Code
 Columbus OH 43209

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Chief Legal Officer & Sec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81725

Amount of Each Receipt this Period

384.60

Receipt

Payroll Deduction: (192.3-
0/Pay Period)

Full Name (Last, First, Middle Initial)

C. Brendan Ford

Mailing Address 798 Tweed Court

City State Zip Code
 Worthington OH 43085

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Evp, Corp Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81672

Amount of Each Receipt this Period

200.00

Receipt

Payroll Deduction: (100.0-
0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

619.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Robert Giacalone Mailing Address 7471 Balfoure Circle City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 478.92			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81801 Amount of Each Receipt this Period 39.91 Receipt Payroll Deduction: (39.91- /Pay Period)
B. Full Name (Last, First, Middle Initial) Robert Giacalone Mailing Address 7471 Balfoure Circle City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 523.15			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7 Transaction ID: 70716.C82069 Amount of Each Receipt this Period 44.23 Receipt Payroll Deduction: (44.23- /Pay Period)
C. Full Name (Last, First, Middle Initial) Robert Glover Mailing Address 5633 N Kostner Ave City State Zip Code Chicago IL 60646 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 369.98			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81781 Amount of Each Receipt this Period 56.92 Receipt Payroll Deduction: (28.46- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			141.06
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) David Goldsberry Mailing Address 321 St Andrews Ln City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Govt Sales & Operatio Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 247.65		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81721 Amount of Each Receipt this Period 38.10 Receipt Payroll Deduction: (19.05- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Gonzales Mailing Address 384 Colorado Drive City Cedar Creek State TX Zip Code 78612 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, State Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81852 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Theresa Gould Mailing Address 3418 Big Hickory Dr. City Kingwood State TX Zip Code 77345 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 232.05		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81718 Amount of Each Receipt this Period 35.70 Receipt Payroll Deduction: (17.85- /Pay Period)
SUBTOTAL of Receipts This Page (optional)		173.80
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Michael Groesbeck

Mailing Address 33916 Summerfield

City State Zip Code
Gurnee IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Svp, Qra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.92

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81720

Amount of Each Receipt this Period

37.82

Receipt

Payroll Deduction: (18.91-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. L Glenn Hall

Mailing Address 6678 Willow Grove Ln
Circle #1502

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Gm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.64

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81790

Amount of Each Receipt this Period

60.56

Receipt

Payroll Deduction: (30.28-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Troy Hanson

Mailing Address 5622 Dorsey Drive

City State Zip Code
Columbus OH 43235

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Dir, Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.35

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81768

Amount of Each Receipt this Period

45.90

Receipt

Payroll Deduction: (22.95-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

144.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Hartman Mailing Address 7677 Tartan Fields Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Operational Excel Hscs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1212.77		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81674 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0-0/Pay Period)
B. Full Name (Last, First, Middle Initial) Linda Harty Mailing Address 1761 Roxbury Rd City State Zip Code Columbus OH 43212 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Cfo, Scs Healthcare Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1398.80		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81681 Amount of Each Receipt this Period 215.20 Receipt Payroll Deduction: (107.6-0/Pay Period)
C. Full Name (Last, First, Middle Initial) Richard Heard Mailing Address 8106 Bulrush Canyon Trail City State Zip Code Katy TX 77494 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81772 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00-/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		465.20
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. James Hethcox

Mailing Address 5442 Haverhill Drive

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Is Medication Executive, Ips

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.97

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81796

Amount of Each Receipt this Period

65.38

Receipt

Payroll Deduction: (32.69-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Stephen Inacker

Mailing Address 1490 S Ridge Rd

City State Zip Code
Lake Forest IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Pres/gm, Presource Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.53

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81785

Amount of Each Receipt this Period

59.62

Receipt

Payroll Deduction: (29.81-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Brian Jackson

Mailing Address 9055 Tartan Flds Dr

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Svp, Specialty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81712

Amount of Each Receipt this Period

32.00

Receipt

Payroll Deduction: (16.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

157.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Stephen Johnson Mailing Address 221 W Lancaster Ave # 2012 City Fort Worth State TX Zip Code 76102 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, South Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 387.53		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81784 Amount of Each Receipt this Period 59.62 Receipt Payroll Deduction: (29.81- /Pay Period)
B. Full Name (Last, First, Middle Initial) Remi Kajogbola Mailing Address 15751 Sheridan St #149 City Fort Lauderdale State FL Zip Code 33331 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 737.49		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81857 Amount of Each Receipt this Period 113.46 Receipt Payroll Deduction: (56.73- /Pay Period)
C. Full Name (Last, First, Middle Initial) Michael Kaufmann Mailing Address 7160 Temperance Point St City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Group President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 494.60		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81726 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3- 0/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		557.68
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michael Kennedy Mailing Address 4783 Vista Ridge Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 376.87		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81783 Amount of Each Receipt this Period 57.98 Receipt Payroll Deduction: (28.99- /Pay Period)
B. Full Name (Last, First, Middle Initial) Joseph Kubicek Mailing Address 443 Douglas City State Zip Code Lake Forest IL 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.85		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81775 Amount of Each Receipt this Period 50.90 Receipt Payroll Deduction: (25.45- /Pay Period)
C. Full Name (Last, First, Middle Initial) Steve Lawrence Mailing Address 4868 Carrigan Ridge City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Mrktng, Retail/alt Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.43		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81676 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

308.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Leidl		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 95 Arboretum Dr		Transaction ID: 70716.C81760
City North Barrington	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.80
Name of Employer Cardinal Health, Inc	Occupation Vp/gm, V Mueller	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.20	Payroll Deduction: (20.40- /Pay Period)

B. Full Name (Last, First, Middle Initial) Michael Lynch		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 550 E Rosemary		Transaction ID: 70716.C81791
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.76
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Med Products Mfg	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	Payroll Deduction: (30.76- /Pay Period)

C. Full Name (Last, First, Middle Initial) Michael Lynch		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 550 E Rosemary		Transaction ID: 70716.C81979
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Med Products Mfg	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2192.30	Payroll Deduction: (192.3- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

263.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Donna Mann Mailing Address 6666 Mcvey Blvd City State Zip Code West Worthington OH 43235 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Hr Svc Delivery/transform Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81765 Amount of Each Receipt this Period 44.00 Receipt Payroll Deduction: (22.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Robin Martial Mailing Address 1741 Haggin Grove W City State Zip Code Carmichael CA 95608 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Sales & Mktg- Hlth Sy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81758 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Janice Mccampbell Mailing Address 8001 Millenium Drive City State Zip Code Raleigh NC 27614 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, R & D Infusion Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 380.76		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81792 Amount of Each Receipt this Period 63.46 Receipt Payroll Deduction: (31.73- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

147.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Lindy Mclean Mailing Address 7272 Black Abbey Ct City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Key Account Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 283.89		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81794 Amount of Each Receipt this Period 63.58 Receipt Payroll Deduction: (31.79- /Pay Period)
B. Full Name (Last, First, Middle Initial) Steven Merkin Mailing Address 1481 Country Ln City Deerfield State IL Zip Code 60015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81816 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Frederick Nelson Mailing Address 7303 Deacon Court City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 484.51		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81799 Amount of Each Receipt this Period 74.54 Receipt Payroll Deduction: (37.27- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

218.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michael Orscheln Mailing Address 601 Buckingham Pl City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp/gm, Ambulatory Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81756 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Mark Overman Mailing Address 900 Wyndham Hill Ct City State Zip Code Southlake TX 76092 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 219.96		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81716 Amount of Each Receipt this Period 33.84 Receipt Payroll Deduction: (16.92- /Pay Period)
C. Full Name (Last, First, Middle Initial) William Owad Mailing Address 7558 Heatherwood Ln City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Operational Excellence Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 492.04		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81625 Amount of Each Receipt this Period 2.00 Receipt Payroll Deduction: (1.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

75.84

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Thomas Perrine Mailing Address 7249 Landon Lane City State Zip Code New Albany OH 43054 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81845 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kevin Peters Mailing Address 465 Fourth Fairway Dr City State Zip Code Roswell GA 30076 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Ips Sales Se Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.91		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81840 Amount of Each Receipt this Period 100.14 Receipt Payroll Deduction: (50.07- /Pay Period)
C. Full Name (Last, First, Middle Initial) George Plava Mailing Address 3526 Pembroke Dr City State Zip Code Richmond TX 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Pharmacy Practice Dev Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 855.40		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81864 Amount of Each Receipt this Period 131.60 Receipt Payroll Deduction: (65.80- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		331.74
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Kathy Popejoy Mailing Address 11127 W 59th Ave City Arvada State CO Zip Code 80004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Region Ops B Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.88		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81761 Amount of Each Receipt this Period 41.52 Receipt Payroll Deduction: (20.76- /Pay Period)
B. Full Name (Last, First, Middle Initial) William Rampy Mailing Address 103 Foxglove Ln City Bentonville State AR Zip Code 72712 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Franchise Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 674.83		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81855 Amount of Each Receipt this Period 103.82 Receipt Payroll Deduction: (51.91- /Pay Period)
C. Full Name (Last, First, Middle Initial) Stephen Reardon Mailing Address 5078 Breckenhurst Dr City Hilliard State OH Zip Code 43026 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Qra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81748 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

185.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Cynthia Rhomberg Mailing Address 9379 Redan Court City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Corp Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81753 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Sandra Rigopoulos Mailing Address 307 S Hi Lusi Ave City State Zip Code Mt Prospect IL 60056 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Customer Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1134.38		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81874 Amount of Each Receipt this Period 174.52 Receipt Payroll Deduction: (87.26- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mark Rosenbaum Mailing Address 6565 Lockhart Lane City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres, Ips Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2076.90		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: 70716.C81730 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3- 0/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		599.12
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Claudia Russell Mailing Address 5064 Seagrove Cove City San Diego State CA Zip Code 92130 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strategy & Innovation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 532.98		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81817 Amount of Each Receipt this Period 84.60 Receipt Payroll Deduction: (42.30- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Schlotterbeck Mailing Address 12 Hermitage Lane City Laguna Niguel State CA Zip Code 92677 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Ceo, Clinical & Medical Pr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1669.20		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81727 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3- 0/Pay Period)
C. Full Name (Last, First, Middle Initial) James Scott Mailing Address 5893 Hunter Pl. Apartment D City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Alternate Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81671 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

669.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Michael Scrase

Mailing Address 8358 Davington

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Director, Enterprise It

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.94

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81779

Amount of Each Receipt this Period

54.76

Receipt

Payroll Deduction: (27.38-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Frank Segrave

Mailing Address 5371 Gordon Way

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
President, Generics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.90

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81732

Amount of Each Receipt this Period

384.60

Receipt

Payroll Deduction: (192.3-
0/Pay Period)

Full Name (Last, First, Middle Initial)

C. Steven Seide

Mailing Address 30 Nutmeg Ln

City State Zip Code
North Andover MA 01845

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Reg Ambulatory Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81713

Amount of Each Receipt this Period

32.30

Receipt

Payroll Deduction: (16.15-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

471.66

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Kendell Sherrer Mailing Address 7720 Heatherwood Ln City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81759 Amount of Each Receipt this Period 40.22 Receipt Payroll Deduction: (20.11- /Pay Period)
B. Full Name (Last, First, Middle Initial) Jesse Sims Mailing Address 11014 Black Falls Ct City State Zip Code Sugar Land TX 77478 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81851 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mark Stauffer Mailing Address 10644 Dundee Ct City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81856 Amount of Each Receipt this Period 106.82 Receipt Payroll Deduction: (53.41- /Pay Period)
SUBTOTAL of Receipts This Page (optional)		247.04
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Robert Summers		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 146 Chasely Circle		Transaction ID: 70716.C81777
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 51.92	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Health Systems	Payroll Deduction: (25.96- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.48	

B. Full Name (Last, First, Middle Initial) Mary Jane Tew		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 6315 Duffy Rd		Transaction ID: 70716.C81774
City State Zip Code Delaware OH 43015	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Field Sales Operations	Payroll Deduction: (25.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C. Full Name (Last, First, Middle Initial) Gordon Troup		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 4627 Stockport Cir		Transaction ID: 70716.C81680
City State Zip Code Dublin OH 43016	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Pres/gm, Nuclear Pharmacy Svcs	Payroll Deduction: (100.0- 0/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional)

301.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Ethan Trull		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 2663 Marl Oak Dr		Transaction ID: 70716.C81715	
City Highland Park	State IL	Zip Code 60035	Amount of Each Receipt this Period 32.48
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp And Assoc General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.12		
B. Full Name (Last, First, Middle Initial) Richard Walsh		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 8722 Sweetwater Ct		Transaction ID: 70716.C81800	
City Powell	State OH	Zip Code 43065	Amount of Each Receipt this Period 79.04
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Flight Ops/bus Cont		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 513.76		
C. Full Name (Last, First, Middle Initial) Robert Walter		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address C/o Cardinal Health 7000 Cardinal Place		Transaction ID: 70716.C81723	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 384.04
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.26		

SUBTOTAL of Receipts This Page (optional)

495.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Carole Watkins Mailing Address 1967 Woodlands Place City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Chief Human Resources Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 976.90			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81729 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3-0/Pay Period)
B. Full Name (Last, First, Middle Initial) Dwight Winstead Mailing Address 2540 Presidio Dr City State Zip Code San Diego CA 92103 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Group President, Cts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 576.90			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81731 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3-0/Pay Period)
C. Full Name (Last, First, Middle Initial) Deborah Wolin Mailing Address 44 Lake Mist Drive City State Zip Code Sugar Land TX 77479 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70716.C81751 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00-/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			809.20
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial)
Connie Woodburn

Mailing Address 9761 Erin Woods Dr

City State Zip Code
Dublin OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Svp, Prof & Gov't Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1665.04

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70716.C81692

Amount of Each Receipt this Period

256.16

Receipt

Payroll Deduction: (128.0-
8/Pay Period)

SUBTOTAL of Receipts This Page (optional)

256.16

TOTAL This Period (last page this line number only)

11241.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 47

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A.

Full Name (Last, First, Middle Initial)

Comerica Bank

Mailing Address Po Box 75000 (mc 2250)

City

Detroit

State

MI

Zip Code

48275-2250

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bank

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3846.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 7

Transaction ID: 70608.C81624

Amount of Each Receipt this Period

701.64

Interest Received

SUBTOTAL of Receipts This Page (optional)

701.64

TOTAL This Period (last page this line number only)

701.64

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Gillmor

Mailing Address PO Box 150

City
Old Fort

State
OH

Zip Code
44861-0150

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
PAUL E GILLMOR

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 05

Transaction ID: 70608.E951

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Nancy Pelosi For Congress

Mailing Address 235 Montgomery St.
Suite 610

City
San Francisco

State
CA

Zip Code
94104-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
NANCY PELOSI

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 8

Transaction ID: 70608.E947

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Regula for Congress Committee

Mailing Address 228 S. Washington Street
Suite 115

City
Alexandria

State
VA

Zip Code
22314-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
RALPH REGULA

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 16

Transaction ID: 70716.E960

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Stabenow for U.S. Senate

Mailing Address 426 C Street, NE

City
Washington

State
DC

Zip Code
20002-5818

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
DEBBIE STABENOW

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: 70716.E962

Date of Disbursement

06 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mike Thompson for Congress

Mailing Address 5429 Madison Ave

City
Sacramento

State
CA

Zip Code
95841-3111

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
MIKE MR. THOMPSON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 1

Transaction ID: 70608.E948

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Tiberi for Congress

Mailing Address 2021 E. Dublin Granville Road
Suite 2000

City
Columbus

State
OH

Zip Code
43229-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
PATRICK J TIBERI

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: 70716.E959

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

2500.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Tiberi for Congress

Mailing Address 2021 E. Dublin Granville Road
Suite 2000

City Columbus State OH Zip Code 43229-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
PATRICK J TIBERI

Office Sought: ☒ House
☐ Senate
☐ President

State: OH District: 12

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70716.E961

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

14000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Senate Republican Campaign Committee

Mailing Address P.O. Box 792
Federal Square Station

City Harrisburg State PA Zip Code 17108-0792

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 70608.E952

Date of Disbursement

06 / 08 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. House Democratic Caucus Fund

Mailing Address 271 E. State Street

City Columbus State OH Zip Code 43215-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 70716.E964

Date of Disbursement

06 / 26 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Citizens for Carey

Mailing Address 401 S. Arkansas Avenue

City Wellston State OH Zip Code 45692-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70716.E955

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Team Coughlin

Mailing Address 2324 Iota Avenue

City Cuyahoga Falls State OH Zip Code 44223-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70716.E956

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Committee for Joyce Beatty, State Rep.

Mailing Address 233 S High St

City Columbus State OH Zip Code 43215-4515

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70716.E953

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Committee for Joyce Beatty, State Rep.

Mailing Address 233 S High St

City Columbus State OH Zip Code 43215-4515

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70716.E963

Date of Disbursement

06 / 26 / 2007

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. DeLuca for Legislature

Mailing Address 1438 Homestead Rd

City Verona State PA Zip Code 15147-2440

Purpose of Disbursement
DIRECT CONTRIBUTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70608.E950

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Citizens for Gardner Committee

Mailing Address 431 N. Prospect Street

City Bowling Green State OH Zip Code 43402-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70716.E957

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Bill Harris

Mailing Address 1238 Township Road
#1506

City Ashland State OH Zip Code 44805-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70716.E954

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Husted for Ohio		Transaction ID: 70608.E949 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		0	4		2	0	0	7													
Mailing Address 148 Sherbrooke Dr		Amount of Each Disbursement this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																						
City Kettering State OH Zip Code 45429-1742																						
Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) Committee to Elect Niehaus		Transaction ID: 70716.E958 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		1	2		2	0	0	7													
Mailing Address 1131 Little Indian Creek Road		Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																						
City New Richmond State OH Zip Code 45157-9602																						
Purpose of Disbursement DIRECT CONTRIBUTION	<input type="text"/>																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

TOTAL This Period (last page this line number only) ►

12500.00

Image# 27950098464

Form/Schedule: **F3XA** The Scott Gregg contribution reported on line 11c should be reported on line 11a.

Transaction ID: **C00332833**
